



CONCORD FIRE DEPARTMENT

FIRE PREVENTION DIVISION

FIRE EXTINGUISHING SYSTEM PERMIT APPLICATION

Submit at:

Concord Fire Department
Fire Prevention Division
35 Cabarrus Ave. W.,
Concord, NC 28025
(704) 920-5517; fax (704) 920-6936

Development # _____**Project #** _____**Permit #** _____**[THIS BOX FOR STAFF USE ONLY]**

Permit Fees paid at time of application are **NON-REFUNDABLE**

(Standard: Total fee due at application)

Permit \$150 and Test Inspection \$150 – Payable to City of Concord

*** All plans for review must be submitted electronically via email to fmo@concordnc.gov**

Project Name/Tenant _____

Bldg Permit # _____

Site Address _____

Unit/Bldg/Suite # _____

Complex Name _____

Tax Parcel # _____

Contractor Name _____

Phone # _____

Contact Name _____

Fax # _____

Business Address _____

City _____

State, ZIP _____

State License Number _____

State License Expiration Date _____

e-mail address _____

Concord Business License # _____

~ TYPE OF WORK ~

Type of Fixed Extinguishing System:

A device is defined as: fusible link, nozzle, manual pull station, or agent cylinder.

☐ **Kitchen Hood (UL 300)** # of devices _____ Releasing Panel _____

☐ **Paint and/ Spray Booth** # of devices _____ Releasing Panel _____

☐ **Other _____** # of devices _____ Releasing Panel _____

Description of work (if additional space is needed the information should be placed on company letterhead):

NOTE: A separate fire alarm permit is required for the connection of any fire protection system to a new or existing fire alarm system.

I understand that all applicable codes apply. Errors and/or omissions on the plans and corrections from field inspections are the responsibility of the owner/contractor. All work is subject to the compliance with City of Concord ordinances and laws of the State of North Carolina.

SIGNATURE**PRINT NAME (Applicant)** _____**PHONE** _____
DATE _____